STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY

Assistive Technology and Adaptive Technology Products and Services Commission for the Blind and Visually Impaired

PROCEDURE FOR REQUEST FOR QUOTATION FROM THE CONTRACT VENDOR.

This document is used to prepare a contract vendor quotation for Assistive Technology products and services. The quotation can only be used for products that are on the approved state contract list for Assistive Technology products. Prepare a separate copy of this document for each category or each contract vendor. If you intend to order a Braille embosser and a portable Braille device, create two separate RFQ documents.

Page 1 of this document is used for information purposes. A copy of page 2 of this document is an order form, to be used to initiate an order for goods and services. Determine what Category will most likely include the products you need. Determine from the vendor or from staff at the Library (Commission) for the Blind and Visually Impaired what specific products you want to order. Get as much detail on the upper half of the order form as possible, and forward the request to the contract vendor.

Initial requests should go to the Primary vendor, then to the Secondary vendor. If you know the Primary does not cover the products you need, go directly to the Secondary. The contract vendor must complete the form, attach to their letterhead response and return the RFQ to the Business Office that can create a Purchase Order.

ategory:	Description:	Vendor:	Contract Number:	Level of Coverage:
1	Screen Reading Software	Visibility Company	46464	Primary Award, Approved Products.
	Screen Reading Software	Maxi-Aids	46462	Secondary Award, Approved Products.
	Screen Reading Software	Cohen Technology	46463	Secondary Award, Approved Products.
2	Braille Conversion Software	Visibility Company	46464	Primary Award, Approved Products.
	Braille Conversion Software	Cohen Technology	46463	Secondary Award, Approved Products.
3	Speech Synthesizer Hardware	Visibility Company	46464	Primary Award, Approved Products.
	Speech Synthesizer Hardware	Maxi-Aids	46462	Secondary Award, Approved Products.
4	Screen Magnification Software	Visibility Company	46464	Primary Award, Approved Products.
	Screen Magnification Software	Maxi-Aids	46462	Secondary Award, Approved Products
5	Portable Braille and Laptop Devices	Visibility Company	46464	Primary Award, Approved Products.
	Portable Braille and Laptop Devices	Maxi-Aids	46462	Secondary Award, Approved Products
	Portable Braille and Laptop Devices	Cohen Technology	46463	Secondary Award, Approved Products
	Portable Braille and Laptop Devices	Humanware	47816	Secondary Award, Approved Products
6	Braille Displays	Visibility Company	46464	Primary Award, Approved Products.
	Braille Displays	Maxi-Aids	46462	Secondary Award, Approved Products
	Braille Displays	Humanware	47816	Secondary Award, Approved Products
7	Braille Embossers	Sighted Electronics	46466	Primary Award, Approved Products.
	Braille Embossers	Visibility Company	46464	Secondary Award, Approved Products
	Braille Embossers	Humanware	47816	Secondary Award, Approved Products
8	Screen Magnifiers, including CCTVs	Magnasight	46467	Primary Award, Approved Products.
	Screen Magnifiers, including CCTVs	Cohen Technology	46463	Secondary Award, Approved Products
	Screen Magnifiers, including CCTVs	Visibility Company	46464	Secondary Award, Approved Products
9	Classroom Aides, Keyboard Alternatives	Thomas Caine Assoc.	46465	Primary Award, Approved Products.

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AGENCY/REQUEST FOR ASSISTIVE TECHNOLOGY GOODS AND SERVICES.

Requestor should complete this portion of the form and forward to the contract vendor. Provide a separate form for each Category needed for the order.

Agency Order Ship To:			Agency Order Bill To:			
This order is placed for the benefit of:				Contact Name, Address, and Telephone::		
Category: (Order Line)	Description:		Contract Number:	Vendor Name and Address:	Agency Order Reference:	
Item 1	Quantity:	Specific Product Description:				
Item 2	Quantity:	Specific Product Description:				
Item 3	Quantity:	Specific Product Description:				
Item 4	Quantity:	Specific Product Description:				
Item 5	Quantity:	Specific Product Description:				
Item 6	Quantity:	Specific Product Description:				

The Contract vendor should indicate the following in response to the above request, for all goods and services covered by the specific contract. Append a separate line for Contract Price Line 10, if needed, for support services not directly included in the manufacturer's product pricing.

QUOTATION RESPONSE FROM THE CONTRACT VENDOR.

Item	Quantity :	Specific Product Description:	MSRP	Contract % Discount	Installed Cost:
1					
2					
3					
4					
5					
6					

Return the completed form(s) to the requesting Business Office, attached to a letterhead Quotation. The State Contract number must be referenced in the letterhead quote and on the above form. An Agency Order form that includes ALL the above information shall suffice for a Request.

All Requests For Quotation must have written response before an order can be filled. Each Business Office must determine whether facsimile RFQ documents are acceptable.